

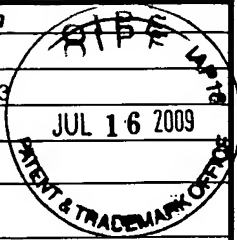
Effective on 12/8/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL

For FY 2009

Complete if Known

Application Number 10/747,936
Filing Date December 29, 2003
First Named Inventor Craig Ogg, et al.
Examiner Name Nathan Erb
Art Unit 3628
Attorney Docket No. PSTA0002/MRK



☒ Applicant Claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 405.00)

METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 501574 Deposit Account Name: Khorsandi Patent Law Group, ALC

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charges fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Small or Large Entity	Fee (\$)	Small or Large Entity	Fee (\$)	Small or Large Entity	Fee (\$)	
Utility	300	150	500	250	200	100	\$0.00
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Small or Large Entity	Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
22	- HP (24) = 0	x \$0.00	= \$00.00			
HP = highest number of total claims paid for, if greater than 20				\$0.00		

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
7	- HP (7) = 0	x \$0.00	= \$0.00
HP = highest number of independent claims paid for, if greater than 3			

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41 (a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 = 0	/ 50 = 0	(round up to a whole number) x \$250.00	= \$0.00	

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: Request for Continued Examination 405.00

SUBMITTED BY

Signature Marilyn R. Khorsandi Registration No. 45744 Telephone (626) 796-2856
Name (Print/Type) Marilyn R. Khorsandi Date July 13, 2009



Effective on 12/8/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2009	Complete if Known	
	Application Number	10/747,936
	Filing Date	December 29, 2003
	First Named Inventor	Craig Ogg, et al.
	Examiner Name	Nathan Erb
<input checked="" type="checkbox"/> Applicant Claims small entity status. See 37 CFR 1.27	Art Unit	3628
TOTAL AMOUNT OF PAYMENT	(\$) 405.00	Attorney Docket No. PSTA0002/MRK

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	Small or Large Entity	Small or Large Entity	Small or Large Entity	Small or Large Entity	Small or Large Entity	Small or Large Entity	
	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	
Utility	300	150	500	250	200	100	\$.00
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Reissue	300	150	500	250	600	300	
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2. EXCESS CLAIM FEES

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	Fee (\$)	Fee (\$)
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Multiple dependent claims	360	180

Total Claims **Extra Claims** **Fee (\$)** **Fee Paid (\$)** **Multiple Dependent Claims**

22 - HP (24) = 0 x \$.00 = \$ 00.00 **Fee (\$)** **Fee Paid (\$)**

HP = highest number of total claims paid for, if greater than 20 \$.00

Indep. Claims **Extra Claims** **Fee (\$)** **Fee Paid (\$)**

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Other: Request for Continued Examination 405.00

SUBMITTED BY			
Signature	<i>Marilyn R. Khorsandi</i>	Registration No. 45744 (Attorney/Agent)	Telephone (626) 796-2856
Name (Print/Type)	Marilyn R. Khorsandi		Date July 13, 2009

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE



hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on July 13, 2009.

Alexandra Allison
Alexandra Allison

Applicant : Craig Ogg, et al.
Application No. : 10/747,936
371' Date : December 29, 2003
Title : OUTBOUND MAIL PIECE TRACKING
Grp./Div. : 3628
Examiner : Erb, Nathan
Docket No. : PSTA0002/MRK

COPY

TRANSMITTAL LETTER

Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

140 S. Lake Ave., Suite 312
Pasadena, CA 91101
July 13, 2009

Commissioner:

Attached are the following:

1. Fee Transmittal (in duplicate);
2. Check No. 2724 in the amount of \$405 for the RCE Fee
3. Request for Continued Examination (RCE) (in duplicate);
4. Amendment and Response (pages 1-28), to April 13, 2009 Office Action (in which no new Claims have been added -- resulting in **no additional claim fee**) with Attachment A, Publication Section 197, sections 1 and 2 (10 pages); and
5. Return Postcard.

This Amendment and Response is filed in reply to the Office Action regarding the above-identified application, dated April 13, 2009. The Office Action set a three-month period in which to respond, namely, by July 13, 2009. It is respectfully submitted that the Amendment and Response is timely filed because it is filed before the expiration of July 13, 2009. Even so, the Commissioner is hereby authorized, pursuant to 37 CFR 1.136(a)(3), to treat any concurrent or future reply or correspondence for the above-identified application, requiring a petition for an extension of time for its timely submission, as incorporating a petition for extension of time for the appropriate length of

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time. The Commissioner is hereby authorized to charge any fees under 37 CFR 1.16 and 1.17, including any required extension fees, which may be required during the **pendency** of this application, and to credit any overpayment, to Deposit Account No. 501574, and to treat this authorization as a constructive petition for an extension of time in any concurrent or future reply or correspondence for this application requiring a petition for an extension of time for its timely submission. Please show our docket number with any charge or credit to our Deposit Account. **A copy of this letter is enclosed.**

Respectfully submitted,
KHORSANDI PATENT LAW GROUP, ALC

By *Marilyn R. Khorsandi July 13, 2009*
Marilyn R. Khorsandi
Reg. No. 45,744
Customer No. 29524
626/796-2856


MRK/aa
Enclosures



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on July 13, 2009.


Alexandra Allison

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Grp./Div. : 3628
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KHORSANDI PATENT LAW GROUP, ALC

By *Marilyn R. Khorsandi* *July 13, 2009*
Marilyn R. Khorsandi
Reg. No. 45,744
Customer No. 29524
626/796-2856

MRK/aa
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